

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>LM</i>	<i>3</i>	<i>1/30</i>
FORMALITY REVIEW	<i>MIB</i>	<i>154</i>	<i>2/14/01</i>
RESPONSE FORMALITY REVIEW	<i>7th</i>	<i>1030</i>	<i>6-20-01</i>
	<i>int-</i>	<i>571</i>	<i>10/20/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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ESP-SSC
 10-22-01